Casa 17-10770-ibf Eiled 03/02/17 Entered 03/02/17 22:06:12 | Desc Main

Fill in t				Document Page 1 of 27			
	his inform	nation to identify	your case and t				
Debtor				•			
Jebioi	1	Sara L Bonne First Name		lle Name Last Name			
Debtor							
Spouse,	if filing)	First Name	Midd	lle Name Last Name			
Jnited 1	States Bar	nkruptcy Court for	the: EASTERN	N DISTRICT OF PENNSYLVANIA			
Case n	umber 1	17-10779					Check if this is a
							amended filing
Offic	ial Fo	rm 106A/B					
		_					4045
		e A/B: Pr		t an asset only once. If an asset fits in more than on			12/15
nswer e	Describe I		ilding, Land, or O	Other Real Estate You Own or Have an Interest In	•		, ,
		ina ya lenal yire aver	iitahla intarast in	any residence building land or similar property?			
Do yo	u own or n	nave any legal or equ	uitable interest in	any residence, building, land, or similar property?			
_ `	. Go to Part		uitable interest in	any residence, building, land, or similar property?			
□ No	. Go to Part		uitable interest in	any residence, building, land, or similar property?			
□ No	. Go to Part	t 2.	uitable interest in	any residence, building, land, or similar property?			
□ No	. Go to Part	t 2.	uitable interest in	any residence, building, land, or similar property?			
□ No ■ Yes	. Go to Part	t 2.	uitable interest in	any residence, building, land, or similar property? What is the property? Check all that apply			
□ No ■ Yes	. Go to Part s. Where is	t 2. s the property? ridge Road	uitable interest in		Do not deduct secur		
□ No ■ Yes	. Go to Part s. Where is 67 Camb	t 2. s the property? ridge Road ridge Road		What is the property? Check all that apply ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secur the amount of any si Creditors Who Have	ecured claims	s on Schedule D:
□ No ■ Yes	. Go to Part s. Where is 67 Camb	t 2. s the property? ridge Road		What is the property? Check all that apply ☐ Single-family home	the amount of any se	ecured claims	s on Schedule D:
□ No ■ Yes	. Go to Part s. Where is 67 Camb	t 2. s the property? ridge Road ridge Road		What is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any si Creditors Who Have	ecured claims e Claims Secu	s on Schedule D: ured by Property.
□ No ■ Yes .1 26 26 Str	. Go to Part s. Where is 67 Camb	t 2. s the property? ridge Road ridge Road if available, or other desc		What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any se	ecured claims e Claims Secu e Curre	s on Schedule D:
□ No ■ Yes .1 26 26 Str	. Go to Part s. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any si Creditors Who Have	ecured claims e Claims Secu e Curre portie	s on Schedule D: ured by Property. ent value of the on you own?
□ No ■ Yes 1 26 26 Str	. Go to Part s. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? \$104,514.	ecured claims e Claims Secure e Curre portion of Other portion e of your own	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 nership interest
□ No ■ Yes 1 26 26 Str	. Go to Part s. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property?	ecured claims e Claims Secure e Curre portion 00 e of your own e, tenancy by	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 nership interest
□ No ■ Yes 1 26 26 Str	. Go to Part s. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$104,514. Describe the nature (such as fee simple)	ecured claims e Claims Secure e Curre portion 00 e of your own e, tenancy by	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 nership interest
□ No ■ Yes 1 26 26 Str	. Go to Part s. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$104,514. Describe the natur (such as fee simple a life estate), if known as the such as fee simple a life estate), if known as the such as fee simple a life estate), if known as fee simple a life estate).	ecured claims e Claims Secure e Curre portion 00 e of your own e, tenancy by	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 nership interest
No Yes	. Go to Part s. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$104,514. Describe the natur (such as fee simple a life estate), if known of the estate o	ecured claims Claims Secure Curre portic OO e of your ow, tenancy by wn.	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 mership interest y the entireties, or
No Yes	Go to Parts. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$104,514. Describe the nature (such as fee simple a life estate), if known Fee simple Check if this is (see instructions)	ecured claims Claims Secure Curre portic OO e of your ow, tenancy by wn.	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 mership interest y the entireties, or
No Yes	Go to Parts. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$104,514. Describe the nature (such as fee simple a life estate), if known Fee simple Check if this is (see instructions)	ecured claims Claims Secure Curre portic OO e of your ow, tenancy by wn.	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 mership interest y the entireties, or
No Yes	Go to Parts. Where is 67 Cambi 67 Cambi eet address, i	t 2. s the property? ridge Road ridge Road if available, or other desc	ription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	Current value of the entire property? \$104,514. Describe the nature (such as fee simple a life estate), if known Fee simple Check if this is (see instructions)	ecured claims Claims Secure Curre portic OO e of your ow, tenancy by wn.	s on Schedule D: ured by Property. ent value of the on you own? \$104,514.00 mership interest y the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 17-10779-jkf Doc 14 Filed 03/02/17 Entered 03/02/17 22:06:12 Desc Main Page 2 of 27 Document Case number (if known) 17-10779 Debtor 1 Sara L Bonner 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Huyndai Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Accent ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model 2005 Year: Debtor 2 only Current value of the Current value of the 128,000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another Vehicle: \$521.00 \$521.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$521.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Miscellaneous household furnishings \$3,000,00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

_			•	f Doc 14		Entered 03/02/17 22:06: Page 3 of 27	
De	ebtor 1	Sara L Bo	nner			Case number (if know	(n) 17-10779
11.	□ No				designer wear, shoes, ad	ccessories	
			Clothir	ng			\$500.00
	■ No □ Yes Non-fa Exam ■ No	ples: Everyday Describe arm animals ples: Dogs, car			ngagement rings, weddin	g rings, heirloom jewelry, watches, gems	s, gold, silver
14.	Any o	ther personal Give specific		-	did not already list, incl	uding any health aids you did not list	
15					m Part 3, including any	entries for pages you have attached	\$3,500.00
Pa	art 4: D	escribe Your Fir	nancial Assets	S			
					st in any of the following	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	oples: Money yo		ur wallet, in you	ur home, in a safe deposit	box, and on hand when you file your pe	tition
17.	Exam		ns. If you hav		accounts; certificates of dounts with the same institu		ge houses, and other similar
			17.1.	Checking	Santander E	3ank	\$0.00
			17.2.	Savings	Santander		\$10.00
18.	Exam ■ No		ds, investme	ly traded stock nt accounts with	h brokerage firms, money	market accounts	
19.		ublicly traded venture	l stock and i	nterests in inc	orporated and unincorp	orated businesses, including an inter	est in an LLC, partnership, and
		. Give specific		about them ne of entity:		% of ownership:	
20.	Nego	tiable instrume	nts include p	ersonal checks,	•	otiable instruments sory notes, and money orders. signing or delivering them.	

	Case 17-10779-jkf	Doc 14		Entered 03 Page 4 of 27	/02/17 22:06:12	Desc Main
Debtor 1	Sara L Bonner		- Boodinent 1		Case number (if known)	17-10779
■ No	es. Give specific information ab	out them r name:				
	rement or pension accounts mples: Interests in IRA, ERISA	., Keogh, 401(k),	403(b), thrift savings ac	ccounts, or other pe	nsion or profit-sharing pl	ans
■ Ye	es. List each account separately Type of	y. account:	Institution nam	e:		
	401(k)		401k			\$800.00
You	urity deposits and prepaymer r share of all unused deposits y mples: Agreements with landlo	you have made s	t, public utilities (electric	, gas, water), teleco		es, or others
■ Ye	9S		Institution nam	e or individual:		
	Teleph	one	Security dep	osit with RCN fo	or phone service	\$155.00
■ No		payment of mor	ney to you, either for life	or for a number of	years)	
24. Inter	ests in an education IRA, in a S.C. §§ 530(b)(1), 529A(b), an	an account in a	qualified ABLE progra	am, or under a qua	lified state tuition prog	ram.
■ No		me and descripti	on. Separately file the r	ecords of any intere	sts.11 U.S.C. § 521(c):	
■ No	ets, equitable or future interes o es. Give specific information ab		other than anything li	sted in line 1), and	rights or powers exer	cisable for your benefit
26. Pate	ents, copyrights, trademarks, mples: Internet domain names	trade secrets, a			ts	
	es. Give specific information ab	oout them				
	nses, franchises, and other comples: Building permits, exclusion			oldings, liquor licens	es, professional licenses	3
	, es. Give specific information ab	out them				
Money	or property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	refunds owed to you by cs. Give specific information ab	out them, includi	ing whether you already	filed the returns an	d the tax years	
					1	
		Federal	: 2016 Tax Return			\$4,247.00
Exa ■ No	ily support mples: Past due or lump sum a s. Give specific information	, ,	support, child support,	maintenance, divord	ce settlement, property s	ettlement

Official Form 106A/B Schedule A/B: Property page 4

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Deb	otor 1	Sara L Bonner	Case number (if known)	17-10779
			_	
30.		amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits, sick pay, v benefits; unpaid loans you made to someone else	acation pay, workers' compens	ation, Social Security
	■ No □ Yes.	Give specific information		
_				
_		sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credit, ho	meowner's, or renter's insuranc	е
Г	T Yes	Name the insurance company of each policy and list its value.		
_			neficiary:	Surrender or refund value:
		terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy,	or are currently entitled to receiv	ve property because
	someo No	one has died.		
	☐ Yes.	Give specific information		
_		s against third parties, whether or not you have filed a lawsuit or made a del ples: Accidents, employment disputes, insurance claims, or rights to sue	mand for payment	
		Describe each claim		
		contingent and unliquidated claims of every nature, including counterclaim	s of the debtor and rights to s	set off claims
	■ No □ Yes.	Describe each claim		
_	Any fin ■ No	nancial assets you did not already list		
		Give specific information		
36.		the dollar value of all of your entries from Part 4, including any entries for p art 4. Write that number here		\$5,212.00
Part	5: De:	escribe Any Business-Related Property You Own or Have an Interest In. List any real e	state in Part 1.	
_		own or have any legal or equitable interest in any business-related property?		
	No. Go	o to Part 6.		
	Yes. G	Go to line 38.		
Part		escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Inter you own or have an interest in farmland, list it in Part 1.	rest In.	
46. l	_ `	u own or have any legal or equitable interest in any farm- or commercial fish	ning-related property?	
	_	Go to Part 7. s. Go to line 47.		
		. 66 to into 47.		
Part	7:	Describe All Property You Own or Have an Interest in That You Did Not List Above		
53. I		u have other property of any kind you did not already list? ples: Season tickets, country club membership		
	■ No □ Yes.	Give specific information		
_				

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) 17-10779 Document Debtor 1 Sara L Bonner

		Gara E Bornior	11 10		
Part	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$104,514.00
56.	Part 2	2: Total vehicles, line 5	\$521.00		
57.	Part 3	3: Total personal and household items, line 15	\$3,500.00		
58.	Part 4	1: Total financial assets, line 36	\$5,212.00		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$9,233.00	Copy personal property total	\$9,233.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$113,747.00

Official Form 106A/B Schedule A/B: Property page 6 Case 17-10779-jkf Doc 14 Filed 03/02/17 Entered 03/02/17 22:06:12 Desc Main Document Page 7 of 27

Fill in this information to identify your case:					
Debtor 1	Sara L Bonner				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PENNSYLVANIA		
Case number	17-10779				
(if known)					☐ Check if this is a
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	s.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	267 Cambridge Road 267 Cambridge Road Clifton Heights, PA 19018	\$104,514.00		\$20,085.00	11 U.S.C. § 522(d)(1)
	Residence: Rowhome Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	Miscellaneous household furnishings	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule A/B: 11.1	\$500.00	•	\$500.00	11 U.S.C. § 522(d)(3)
	Line nom Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
	Savings: Santander Line from Schedule A/B: 17.2	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	Line Holli Schedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	401(k): 401k Line from <i>Schedule A/B</i> : 21.1	\$800.00		\$800.00	11 U.S.C. § 522(d)(12)
	LITE ITOTT SCHEUUIE AVB. 21.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Sara L Bonner (if known) 17-10779

		·	11 10110
rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own		
	Copy the value from Schedule A/B	Check only one box for each exemption.	
elephone: Security deposit with	\$155.00	\$155.00	11 U.S.C. § 522(d)(5)
ne from Schedule A/B: 22.1		☐ 100% of fair market value, up to any applicable statutory limit	
ederal: 2016 Tax Return	\$4,247.00	\$4,247.00	11 U.S.C. § 522(d)(5)
TIE HOTH SCHEUUE AVB. 20.1		100% of fair market value, up to any applicable statutory limit	
Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No	3 years after that for ca	ses filed on or after the date of adjustme	,
	elephone: Security deposit with CN for phone service ne from Schedule A/B: 22.1 ederal: 2016 Tax Return ne from Schedule A/B: 28.1 re you claiming a homestead exemption subject to adjustment on 4/01/19 and every No 1 Yes. Did you acquire the property cover	chedule A/B that lists this property portion you own Copy the value from Schedule A/B elephone: Security deposit with CN for phone service ne from Schedule A/B: 22.1 ederal: 2016 Tax Return ne from Schedule A/B: 28.1 style="text-align: right;">\$4,247.00 re you claiming a homestead exemption of more than \$160,37 subject to adjustment on 4/01/19 and every 3 years after that for call No Yes. Did you acquire the property covered by the exemption with the property covered by the exemption of the property covered	chedule A/B that lists this property Copy the value from Schedule A/B

		Document Page 9	OT 27		
Fill in this	information to identify you	ır case:			
Debtor 1	Sara L Bonner				
	First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filin	q) First Name	Middle Name Last Name		-	
	0 /				
United Stat	es Bankruptcy Court for the:	EASTERN DISTRICT OF PENNSYLVANIA		-	
Case numb	per 17-10779				
(if known)	-			☐ Check	if this is an
				ameno	ed filing
Official I	Form 106D				
		Who Llove Claims Secure	h by Dranart		40/45
Scried	ule D. Creditors	Who Have Claims Secured	by Propert	у	12/15
	opy the Additional Page, fill it o	If two married people are filing together, both are eq out, number the entries, and attach it to this form. Or			
1. Do any cre	editors have claims secured by	your property?			
□ No.	Check this box and submit the	nis form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
■ Yes	. Fill in all of the information I	below.			
Part 1:	List All Secured Claims				
<u> </u>	ecured claims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each clair much as pos	m. If more than one creditor has sible, list the claims in alphabetic	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
1711	klin American	Describe the property that secures the claim:	\$84,429.00	\$104,514.00	\$0.00
	gage Company r's Name	267 Cambridge Road 267			
PO E	3ox 11733	Cambridge Road Clifton Heights, PA 19018 Residence: Rowhome As of the date you file, the claim is: Check all that			
_	ark, NJ 07101	apply. Contingent			
Numbe	r, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes	the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1	•		cured		
Debtor 2	only and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	one of the debtors and another	☐ Judgment lien from a lawsuit			
_	this claim relates to a	Other (including a right to offset) Mortgage			
commu	nity debt	,			
Date debt w	as incurred <u>06/17/2014</u>	Last 4 digits of account number 1829			
2.2 Gala	nte Auto Sales	Describe the property that secures the claim:	\$2,900.00	\$521.00	\$2,379.00
	r's Name	2005 Huyndai Accent 128,000 miles	<u> </u>		
		Vehicle:			
412 I	Dutton Street	As of the date you file, the claim is: Check all that apply.			
Asto	n, PA 19014	☐ Contingent			
Numbe	r, Street, City, State & Zip Code	☐ Unliquidated			
Who owes	the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1		☐ An agreement you made (such as mortgage or sec	cured		
Debtor 1 Debtor 2	•	car loan)			
	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			

Official Form 106D

■ Other (including a right to offset) Automobile Loan

☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

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Debtor 1 Sara L Bonner			Case number (if know)	17-10779	
	First Name	Middle Name	Last Name		
Date d	ebt was incurred	09/25/2016	Last 4 digits of account number		
Add	the dollar value of	f your entries in Columr	A on this page. Write that number her	e: \$87,329.	00
	s is the last page that number her		ollar value totals from all pages.	\$87,329	00
Part 2	List Others t	o Be Notified for a D	ebt That You Already Listed		
trying than o	to collect from yo ne creditor for any	u for a debt you owe to	fied about your bankruptcy for a debt the someone else, list the creditor in Part 1 isted in Part 1, list the additional credit ge.	, and then list the collection age	ncy here. Similarly, if you have more
	Name, Number, St	treet, City, State & Zip Co	de	On which line in Part 1 did you ente	er the creditor? _2.1_
	701 Market st Philadelphia,	reet Suite 5000 PA 19106		Last 4 digits of account number	

00	100 17 10770 JM	Docume	ent Page 11 of 27	2.00.12	COO Man
Fill in this inf	ormation to identify your				
Debtor 1	Sara L Bonner				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Medalla Nassa	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	DF PENNSYLVANIA		
Case number	17-10779				
(if known)	-			□ c	heck if this is an
				ar	mended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Have Unsecu	ured Claims		12/15
any executory of Schedule G: Ex Schedule D: Cre left. Attach the	contracts or unexpired leases ecutory Contracts and Unexp editors Who Have Claims Sec	that could result in a claim ired Leases (Official Form 1 ured by Property. If more sp	PRIORITY claims and Part 2 for creditors with N . Also list executory contracts on Schedule A/ 106G). Do not include any creditors with partia pace is needed, copy the Part you need, fill it o on to report in a Part, do not file that Part. On the	B: Property (Officia Ily secured claims out, number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
Part 1: Lis	t All of Your PRIORITY Un	secured Claims			
1. Do any cre	ditors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
☐ Yes.					
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cre	ditors have nonpriority unsec	cured claims against you?			
☐ No. You	have nothing to report in this p	art. Submit this form to the co	ourt with your other schedules.		
Yes.					
unsecured	claim, list the creditor separately	y for each claim. For each cla	der of the creditor who holds each claim. If a cr im listed, identify what type of claim it is. Do not lis 3.If you have more than three nonpriority unsecure	st claims already incl	luded in Part 1. If more
					Total claim
4.1 Aller	S Ruane DDS	Last 4 digits	s of account number		\$250.00
1603	ority Creditor's Name Rhawn Street Idelphia, PA 19111	When was t	the debt incurred?		
	er Street City State Zlp Code	As of the da	ate you file, the claim is: Check all that apply		
Who in	ncurred the debt? Check one.				
■ De	btor 1 only	☐ Continge	ent		
☐ De	btor 2 only	☐ Unliquida	ated		
☐ De	btor 1 and Debtor 2 only	☐ Disputed	I		
☐ At	least one of the debtors and and	other Type of NO	NPRIORITY unsecured claim:		
	eck if this claim is for a com				
debt Is the	claim subject to offset?	☐ Obligatio report as price	ons arising out of a separation agreement or divorc	ce that you did not	
■ No	•		pension or profit-sharing plans, and other similar	debts	
— No		Other. Sp			
	-	— Oulel. S	poony		

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Sara L Bonner	Case number (if know) 17-10779	
Aston Veterinary Hospital	Last 4 digits of account number	\$1,600.00
Nonpriority Creditor's Name 5200 Pennell Road	When was the debt incurred?	
Media, PA 19063 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ Debtor I and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	Student loans	
☐ Check if this claim is for a community lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	
Barclays Bank Delaware	Last 4 digits of account number 1931	\$4,815.00
Nonpriority Creditor's Name P.o. Box 8803	When was the debt incurred? Opened 06/13	
P.O. BOX 8803 Wilmington, DE 19899	When was the debt incurred? Opened 06/13	
lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Credit Card	
Barclays Bank Delaware	Last 4 digits of account number	\$1,097.00
Nonpriority Creditor's Name		
PO Box 8803 Wilmington, DE 19899	When was the debt incurred? Date Opened: 06/1/2013	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collections	

Document Page 13 of 27 Debtor 1 Sara L Bonner Case number (if know) 17-10779 **Berks Credit & Coll Riddle Surgical** 9431 \$100.00 4.5 Last 4 digits of account number Ctr Nonpriority Creditor's Name 900 Corporate Dr When was the debt incurred? **Opened 06/16** Reading, PA 19605 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection ☐ Yes 4.6 Comcast Last 4 digits of account number \$475.00 Nonpriority Creditor's Name When was the debt incurred? 116 West Township Line Havertown, PA 19083 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.7 **Credit Coll** 0285 \$110.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 607 When was the debt incurred? Norwood, MA 02062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify 06 Nationwide Insurance

Debto	r 1 Sara L Bonner		4 01 2 7 Case number (if know) 17-10779	
4.8	Credit Collection Svc Comcast Cable	Last 4 digits of account number	0257	\$475.00
	Nonpriority Creditor's Name			
	Po Box 710 Norwood, MA 02062	When was the debt incurred?	Opened 11/16	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collections	· · · · · · · · · · · · · · · · · · ·	
4.9	Jeanne Marie Cella, Esq.	Last 4 digits of account number		\$2,500.00
_	Nonpriority Creditor's Name 215 N Olive St, Ste 101	When was the debt incurred?		
	Media, PA 19063 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	■ Other. Specify Legal Fees		
4.1	Kohls/capone	Last 4 digits of account number	1907	\$369.00
0	Nonpriority Creditor's Name			4000.00
	N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	Opened 10/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	

☐ Yes

■ Other. Specify Charge Account

Document Page 15 of 27 Debtor 1 Sara L Bonner Case number (if know) 17-10779 4.1 Kohls/Capone \$369.00 Last 4 digits of account number Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr When was the debt incurred? Date Opened: 10/1/2014 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.1 **Main Line Health** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name West Lancaster Ave When was the debt incurred? Paoli, PA 19301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt ☐ Yes 4.1 Midland Funding Synchrony Bank 9709 \$827.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 2365 Northside Dr Ste 30 When was the debt incurred? **Opened 01/16** San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Collections

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Sara L Bonner Case number (if know) 17-10779 4.1 **PA Unemployment** \$8,000.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 1010 North 7th Street When was the debt incurred? Harrisburg, PA 17102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.1 **Patient First** \$81.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 5000 Cox Rd When was the debt incurred? Glen Allen, VA 23060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.1 **PECO** 6030 \$603.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 37629 When was the debt incurred? Philadelphia, PA 19101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Utility Bill

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Debtor 1 Sara L Bonner Case number (if know) 17-10779 4.1 Portfolio Recovery Ass Citibank 2192 \$6,352.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 09/16** Norfolk, VA 23502 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes **Receivable Management Patient** 4.1 6719 \$81.00 8 Last 4 digits of account number **First** Nonpriority Creditor's Name Pob 17305 When was the debt incurred? **Opened 05/16** Richmond, VA 23226 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes 4.1 \$200.00 Riddle Surgical Center Last 4 digits of account number Nonpriority Creditor's Name 1068 West Baltimore Pike When was the debt incurred? Media, PA 19063 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community deht ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt

☐ Yes

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Debtor 1 Sara L Bonner Case number (if know) 17-10779 4.2 Synchrony Bank \$827.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 200 Crossing Blvd When was the debt incurred? Bridgewater, NJ 08807 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.2 Td Bank Usa/targetcred 7256 \$579.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 673 When was the debt incurred? **Opened 10/14** Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 Us Dept Of Ed/alelsi 8581 \$52.654.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 7860 When was the debt incurred? **Opened 08/11** Madison, WI 53707 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

Educational

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Case number (if know) Debtor 1 Sara L Bonner 17-10779 4.2 **VSEC** \$950.00 3 Last 4 digits of account number Nonpriority Creditor's Name 1114 South Front Street When was the debt incurred? Philadelphia, PA 19147 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Collections Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Berks Credit & Coll** Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 900 Corporate Dr Part 2: Creditors with Nonpriority Unsecured Claims Reading, PA 19605 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Credit Collection Serv Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 710 ■ Part 2: Creditors with Nonpriority Unsecured Claims Norwood, MA 02062 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Dr Ste 30 Part 2: Creditors with Nonpriority Unsecured Claims san diego, CA 92108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Receivable Management** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Pob 17305 Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23226 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** Domestic support obligations 6a. 0.00 Total claims 6b. from Part 1 Taxes and certain other debts you owe the government 6b. 0.00 Claims for death or personal injury while you were intoxicated 6c. 0.00 6c. Other. Add all other priority unsecured claims. Write that amount here. 0.00 6d. 6d. Total Priority, Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 52,654.00

Total

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Debtor 1 Sar	a L Bo		Case r	number (if know)	17-10779
from Part 2	6g.	Obligations arising out of a separation agreement or divorce you did not report as priority claims	e that 6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar of	debts 6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that am here.	ount 6i.	\$	31,160.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	83,814.00

		20041116	11. 1440 22 01 21	
Fill in this info	ormation to identify your	case:		
Debtor 1	Sara L Bonner			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	PENNSYLVANIA	
Case number	17-10779			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Acceptance Now 5501 Headquarters Dr Plano, TX 75024	Acct# R094020000682R0940200717 Opened 07/15 RentalAgreement
2.2	Acceptance Now 5501 Headquarters Dr Plano, TX 75024	Acct# R095410000443R0954100511 Opened 05/15 RentalAgreement
2.3	Toyota Motor Credit Co 240 Gibraltar Rd Ste 260 Horsham, PA 19044	Acct# 20392GP470 Opened 08/14 Lease

Fill in this	s information to identify your	Docume	nt Page 22 d	of 27	
Debtor 1	•				
Debior 1	Sara L Bonner First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA		
Case num	17-10779			☐ Check if this is an amended filing	
	l Form 106H Jule H: Your Cod	ebtors		12/	15
people are fill it out, a	e filing together, both are equ	ally responsible for supp boxes on the left. Attach	lying correct informat the Additional Page t	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional P to this page. On the top of any Additional Pages, wr	age,
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	e as a codebtor.	
■ No					
	thin the last 8 years, have you na, California, Idaho, Louisiana			ry? (Community property states and territories include ington, and Wisconsin.)	
`	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person sh sure you have listed the creditor on Schedule D (Of 06G). Use Schedule D, Schedule E/F, or Schedule G	fficial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the d Check all schedules that apply:	ebt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	
-	Number Street City	State	ZIP Code		
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
-	Number Street City	State	ZIP Code	_	

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Sill	in this information to identify your o	200								
	otor 1 Sara L Bon									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	e: _EASTERN DISTRICT	OF PENNSYLVANIA							
	se number 17-10779		-			□ An		ed filing ent showin	ng postpetition	
\bigcirc	fficial Form 106I								ollowing date	:
	chedule I: Your Inc	ome				M	M / DD/ Y	YYY		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing wi	ith you, do not includ	le inforr	natio	n about	your spo	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-f	iling spouse	
	If you have more than one job,	F	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status*	☐ Not employed				☐ Not e	mployed		
	employers. Include part-time, seasonal, or	Occupation	Collections Spec	cialist;(Call					
	self-employed work.	Employer's name	Quench							
	Occupation may include student or homemaker, if it applies.	Employer's address	780 5th Ave, Ste King of Prussia,		406					
		How long employed the		chment	for A	Additiona	al Emplo	yment Inf	formation	
Esti	mate monthly income as of the cuse unless you are separated.		you have nothing to re	port for	any li	ine, write	\$0 in the	space. In	clude your no	on-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all e	mplo	yers for th	hat perso	n on the li	ines below. If	you need
						For Debt	tor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,0	033.34	\$	N/A	_
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	_
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	3.03	3 34	\$	N/A	

Deb	tor 1	Sara L Bonner	_	Case	e number (if known)	17-10779)	
				Fo	r Debtor 1	For Debt	tor 2 or g spouse	
	Cop	y line 4 here	4.	\$	3,033.34	\$	N/A	
5.	List	all payroll deductions:						
•	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	608.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$-	0.00	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$-	46.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	=
	5e.	Insurance	5e.	\$	0.00	\$	N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	-
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	•
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	654.00	\$	N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,379.34	\$	N/A	
8.	List 8a. 8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependen	8a. 8b. t	\$_ \$_	0.00	\$ 	N/A N/A	
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	ee 8f. 8g.	\$_ \$_	0.00 0.00	\$ \$	N/A N/A	
	8h.	Other monthly income. Specify: Contributionfrom from Family	8h.+	\$	1,000.00	+ \$	N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,000.00	\$	N/A	
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$		3,379.34 + \$	N/	/A = \$	3,379.34
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	Ľ					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, you are friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	ır depen			ted in Sched	dule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The re e that amount on the Summary of Schedules and Statistical Summary of Certailes				a, if it	2. \$	3,379.34
13.	Do :	you expect an increase or decrease within the year after you file this forn No.	n?					y income
		Yes. Explain: ASD Change: Last date of employment was 1/6/	17					

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Debtor 1	Sara L Bonner	Case number (if known) 17-10779
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Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	Collections Specialist	
Name of Employer	Quench	
How long employed	0 Years, 0 Months	
Address of Employer	780 5th Avenue	
	King of Prussia, PA 19406	
Debtor		
Occupation	Call Specialist Trainer	
Name of Employer	ASD	
How long employed	1 Years, 0 Months	
Address of Employer	108 Chesley Drive	
	Media, PA 19063	

Official Form 106I Schedule I: Your Income page 3

Filli	n this informa	ition to identify yo	our case:			l		
Debt		Sara L Bonn					k if this is: An amended filing	
Debt							A supplement show	ving postpetition chapter
(Spo	use, if filing)					1	13 expenses as of	the following date:
Unite	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF PENNS	YLVANIA	1	MM / DD / YYYY	
	e number 17	7-10779						
Of	ficial Fo	rm 106J						
		J: Your						12/15
info	rmation. If m		eded, atta	. If two married people and the second in th				
Part		ribe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□и	0		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								□ Yes
						_		□ No
								☐ Yes ☐ No
								□ No □ Yes
3.		enses include	. •	No				— 103
		f people other t d your depende		Yes				
Part	2: Fstim	ate Your Ongoi	na Month	ly Fynenses				
Esti exp	mate your ex	cpenses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
the	value of sucl	h assistance an		government assistance it			Your exp	enses
(On	icial Form 10	וטו.)					Tour exp	
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		875.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner'				4b. \$		0.00
		maintenance, re owner's associa		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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otor 1 S	Sara L Bonner	Case number (if k	known) 17-10779
Utilities	s:		
	lectricity, heat, natural gas	6a. \$	198.00
6b. V	Vater, sewer, garbage collection	6b. \$	30.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c. \$	315.00
	Other. Specify:	6d. \$	0.00
	nd housekeeping supplies	7. \$	400.00
	are and children's education costs	8. \$	0.00
	g, laundry, and dry cleaning	9. \$	15.00
	al care products and services	10. \$	
	•	· —	25.00
	I and dental expenses	11. \$	40.00
	ortation. Include gas, maintenance, bus or train fare. include car payments.	12. \$	150.00
	inment, clubs, recreation, newspapers, magazines, and books	13. \$	15.00
	ble contributions and religious donations	14. \$	0.00
		14. Ф	0.00
. Insurar	nclude insurance deducted from your pay or included in lines 4 or 20.		
	ife insurance	15a. \$	0.00
	lealth insurance	15b. \$	0.00
	realitrinsurance		200.00
	Other insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20 .		2.22
Specify		16. \$	0.00
	nent or lease payments:	170 °C	200.00
	Car payments for Vehicle 1	17a. \$	200.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	ayments of alimony, maintenance, and support that you did not rep		0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form		
•	payments you make to support others who do not live with you.	\$ _	0.00
Specify		19.	
	eal property expenses not included in lines 4 or 5 of this form or on		
	fortgages on other property	20a. \$	0.00
	deal estate taxes	20b. \$	0.00
	roperty, homeowner's, or renter's insurance	20c. \$	0.00
	faintenance, repair, and upkeep expenses	20d. \$	0.00
20e. H	Iomeowner's association or condominium dues	20e. \$	0.00
Other:	Specify: Gym	21. +\$	30.00
Restitu		+\$	220.00
Pet Ca	ire	+\$	150.00
Parkin	· · ·	+\$	50.00
	ate your monthly expenses		
	d lines 4 through 21.	\$_	2,913.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2 \$	
22c. Ad	d line 22a and 22b. The result is your monthly expenses.	\$ -	2,913.00
	ate your monthly net income.	4	
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,379.34
23b. C	Copy your monthly expenses from line 22c above.	23b\$	2,913.00
	subtract your monthly expenses from your monthly income.	222 €	466.34
Т	he result is your monthly net income.	23c. \$	400.34
D- ·	avnost an increase or decrease in value average within the	ftor vou file this farm	3
	expect an increase or decrease in your expenses within the year at nple, do you expect to finish paying for your car loan within the year or do you expe		
i oi call	tion to the terms of your mortgage?	oc your mongage paymen	it to moreage or accrease because o
	uon to the terms of your mortgage:		
	uon to the terms of your mortgage:		